

ABSTRAK

Darlina, Afrah Intan. 2017. *Analisis Cost-Effectiveness Penggunaan Antibiotik Seftriakson-Metronidazol Dan Sefotaksim-Metronidazol Pasca Operasi Apendektomi (Studi Dilakukan Pada Pasien Apendisitis Akut Perforasi Dewasa Di Rsud "Kanjuruhan" Kepanjen Malang)*. Tugas Akhir, Program Studi Farmasi, Fakultas Kedokteran, Universitas Brawijaya. Pembimbing: (1) Hananditia Rachma Pramestutie, M.Farm.Klin., Apt., (2) Ratna Kurnia Illahi, S.Farm., Mp.Pharm., Apt.

Apendisitis adalah obstruksi lumen apendiks akibat hiperplasia jaringan limfoid yang bisa berujung perforasi. Pada apendisitis akut perforasi, antibiotik seftiakson-metronidazol dan sefotaksim-metronidazol digunakan 90% dalam terapi, namun belum diketahui diantara keduanya yang lebih *cost-effective*. Penelitian ini bertujuan untuk melalukan *Cost effectiveness analysis* (CEA) terhadap kombinasi antibiotik tersebut dengan perspektif penyedia layanan kesehatan. Pengumpulan data secara retrospektif menggunakan rekam medis dan data keuangan pasien. Sampel sebanyak 27 pasien diambil sesuai kriteria inklusi dan eksklusi yang telah ditetapkan. Analisis farmakoekonomi CEA yang digunakan adalah perhitungan *Average Cost Effectiveness Ratio* (ACER) dan *Incremental Cost Effectiveness Ratio* (ICER). Berdasarkan analisis ACER pada pasien umum pilihan terapi yang lebih *cost-effective* adalah sefotaksim generik-metronidazol dibandingkan seftiakson generik-metronidazol berdasarkan lama rawat inap dan lama hilangnya demam. Sedangkan, pada pasien JKN yang menggunakan sefotaksim generik-metronidazol lebih *cost-effective* berdasarkan lama rawat inap dibandingkan dengan seftiakson generik-metronidazol. Berdasarkan analisis ICER tidak ditemukan alternatif yang lebih *cost-effective* karena menghasilkan nilai 0. Dapat disimpulkan bahwa antara pasien umum dan JKN yang lebih *cost-effective* adalah penggunaan antibiotik sefotaksim generik-metronidazol pada pasien apendisitis akut perforasi pasca apendektomi.

Kata Kunci: Apendisitis perforasi, CEA, seftiakson-metronidazol, sefotaksim-metronidazol

ABSTRACT

Darlina, Afroh Intan. 2017. *Cost-Effectiveness Analysis in The Usage of Antibiotics Ceftriaxone-Metronidazole and Cefotaxime-Metronidazole Post-Operation Appendectomy (Study On Acute Appendicitis Perforation Adult Patients in "Kanjuruhan" Kepanjen Malang Hospitals)*. Final Assignment, Pharmacy Program, Faculty of Medicine, Universitas Brawijaya. Supervisors: (1) Hananditia Rachma Pramestutie, M.Farm.Klin., Apt., (2) Ratna Kurnia Illahi, S.Farm., Mp.Pharm., Apt.

Appendicitis is an obstruction of appendiceal lumen caused by hyperplasia of lymphoid tissue that can lead to perforation. In acute appendicitis perforation, ceftriaxone-metronidazole and cefotaxime-metronidazole antibiotics have been widely used by 90% of the patients, but the most cost-effective between both of them are unknown. This research aims to do cost-effectiveness analysis (CEA) between both antibiotics combination by using health care providers perspective. The data was collected retrospectively by using medical records and financial data of the patient. Sample of 27 patients were taken in accordance based on inclusion and exclusion criterias. Average Cost Effectiveness Ratio (ACER) and Incremental Cost Effectiveness Ratio (ICER) was used to analysed the cost-effectiveness. Based on calculation of ACER of the public patients, treatment options that was most cost-effective was generic cefotaxime-metronidazole compared with the generic ceftriaxone-metronidazole based on length of stay and duration of fever loss. Whereas, in JKN patients with generic cefotaxime-metronidazole was the most cost-effective based on length of stay compared with the generic ceftriaxone-metronidazole. Based on calculation of ICER, there were not the most cost-effective antibiotic as alternative therapy because its value was 0. It can be concluded that among public and JKN patients, combination of generic cefotaxime-metronidazole is the most cost-effective option in patients with acute perforation apendistis post-appendectomy.

Keywords: Perforation apendistis, CEA, ceftriaxone-metronidazole, cefotaxime-metronidazole

